

## Florida Department of State

Division of Corporations Electronic Filing Cover Sheet

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(((H21000080518 3)))



H210000605183ABCZ

To:			
	Division of Co	rporations	
	Fax Number	: (850)617-6381	
From:			
	Account Name	: FASTKIT CORP	
	Account Number	; I20100000009	
	Phone	: (305)599-0839	
	Fax Number	: (305)592-9591	
*Enter	the email address	for this business entity to be used for future ngs. Enter only one email address please.**	

## FLORIDA PROFIT/NON PROFIT CORPORATION LINE LEADER, INC.

Certificate of Status	0
Certified Copy	1
Page Count	02
Estimated Charge	\$78.75



Electronic Filing Menu

Corporate Filing Menu

Help

J DENNIS MAR - 1 2021

ARTICLES OF INCORPORATION
In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)

TICLE II P	RINCIPAL OFFICE			
LUDDA PA	Principal street address			
9 SW 139 CT	<u>.                                    </u>		Mailing address, if different is	s.
VMI, FL 33175		_ <u>5409</u>	LSW 139 CT	
		(41)-(4	VII, FL 33175	
ICLE III PL	IRPOSE	<del></del>		
purpose for wh	ich the corporation is organized is: ANY A	ME 41		
	Alat A	NO ALL LAWFUL	L BUSINESS	
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	<del>-</del>			
umber of shares	of stock is: 100 SHARES AT \$1.00 PAR	VALUE		
umber of shares	of stock is: 100 SHARES AT \$1.00 PAR	-		
umber of shares  CLB V INT  Name and T	of stock is: 100 SHARES AT \$1.00 PAR  TAL OFFICERS AND/OR DIRECTORS  itle: Anacary Gonzalez Rulz, President	-	c: <u>Monica Gonzalez, Vice</u> P	)res
umber of shares	of stock is: 100 SHARES AT \$1.00 PAR  TAL OFFICERS AND/OR DIRECTORS  itle: Anacary Gonzalez Rulz, President	Name and Title		)res
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ARTICLE VI	REGISTERED AGENT		
I be name and	Florida street address (P.O. Box NOT acceptable) of the r	egistored agent is:	
Name:	Anacary Gonzalez Ruiz		
Address:	5409 SW 139 Ct		
	Miami, FL 33175		
<u>IRTICLE VII</u>	INCORPORATOR		
he name and a	address of the Incorporator is:		
Name;	Monica Gonzalez		
Address:	5409 SW 138 CT		
	MIAMI, FL 33175		
RTICLE VIII	EFFECTIVE DATE:		
I an effective d	other than the date of filing:  [ate is listed, the date must be specific and cannot be m	(OPTIONAL)	
ling.)	A A A Continue De II	ore than tive days prior or 90 days after the	
ote: If the date	inserted in this block does not meet the applicable statute ffective date on the Department of State 's records.	filing marian	
s document's ei	ffective date on the Department of State's records.	ay imag requirements, this date will not be listed as	
tving been nam	ed as registered agent to accept remine of accept to		
, ,	ned as registered agent to accept service of process for the a similar with and accept the appointment as registered agen	bove stated corporation at the place designated in this it and agree to act in this canocin:	
(mach	my Tong alalin-		
V V V	Required Signature/Registered Agent	2-25-2021	
what this door	iment and affirm that the facts stated bearings	Date  am aware that the false information submitted in a  vided for in a 817.155. E. c.	
Michael de Alia T	and a second state of the second seco		
cument to the D	enem unit affirm that the facts stated herein are true. I separtment of State constitutes a third degree felony as pro	an aware that the false information submitted in a vided for in s-817.155, F.S.	
O DUA	epuriment of State constitutes a third degree felony as pro	wided for in \$817.155, F.S.  2-25-202 [	

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